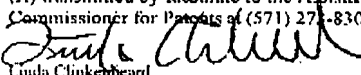
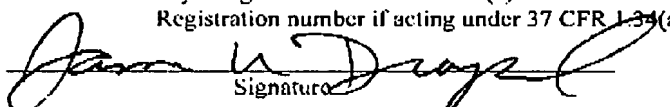


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 043978-010000
CERTIFICATE OF MAILING/TRANSMISSION (37 CFR § 1.8(a)) I hereby certify that this correspondence is, on the date shown below, being: () deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Mail Stop: RCE, Commissioner for Patents, Alexandria, Virginia 22313-1450. (X) transmitted by facsimile to the Assistant Commissioner for Patents at (571) 273-8300.  Linda Clinkheart		In re Application of Thomas Lemmons Application Number: 09/935,873 Filed: August 23, 2001 For: SYSTEM AND METHOD FOR OPTIMIZING BROADCAST BANDWIDTH AND CONTENT Group Art Unit: 2623 Examiner: Chowdhury, Sumaiya A.
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and appropriate entity fee are as follows (check time period desired): <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120) <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450) <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020) <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590) <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160) </div> <div> \$ 60.00 \$ _____ \$ _____ \$ _____ \$ _____ </div> </div> <div> <input type="checkbox"/> Applicant claims small entity status. <input type="checkbox"/> A check to cover the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-3557</u>. Enclosed is a duplicate copy of this sheet. </div> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____</p> <div style="display: flex; justify-content: space-between;"> <div>  Signature James W. Drapinski Reg No. 46,242 Typed or printed name </div> <div> August 8, 2007 Date 415 984-8200 Telephone Number </div> </div> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input checked="" type="checkbox"/> Total of 1 forms are submitted.</p>		

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